



JC03 Rec'd PCT/PTO 25 OCT 2005

10/5/8802 PCT-

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on this 21st day of October 2005.

By _____

Kelley D. Surprenant
(Signature of person mailing)

Kelley D. Surprenant

(Typed or printed name of person)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

RECEIVED

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

NOV 18 2005

Power of Attorney

TECH CENTER 1600/2900

Sir:

Enclosed for filing are: Statement under 37 CFR 3.73(b) with attachments regarding 35 patents and applications and copy of Power of Attorney and Revocation of previous Powers of Attorney.

Respectfully submitted,

Frank W. Forman
Frank W. Forman
Attorney for Applicant(s)
Reg. No. 42,547

Date: October 21, 2005

Pfizer Inc
Patent Department
Eastern Point Road, MS8260-1611
Groton, Connecticut 06340
(860) 715-5669

POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).

I hereby appoint:

Practitioners associated with the Customer Number:

28523

OR

Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):

Name	Registration Number		Name	Registration Number

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:

The address associated with Customer Number:

28523

OR

<input type="checkbox"/> Firm or Individual Name			
Address			
City		State	Zip
Country			
Telephone		Email	

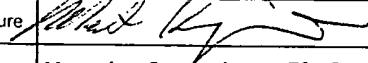
Assignee Name and Address:

Pfizer (formerly, Vicuron Pharmaceuticals Inc.)
455 South Gulph Road, Suite 305
King of Prussia, PA 19406

A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

SIGNATURE of Assignee of Record

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Signature		Date 13 October 2005
Name	Martin Stogniew, Ph.D.	Telephone 610-491-2203
Title	Pfizer (formerly Executive VP, Scientific Affairs, Vicuron Pharmaceuticals Inc.)	

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.